

Health First!
Submission to Environmental Registry on
Creating Ontario's Toxics Reduction Strategy,
the Ministry of the Environment Discussion
Paper

October 10, 2008

Registered Nurses' Association of Ontario
(RNAO)

RNAO Submission on *Creating Ontario's Toxics Reduction Strategy*

The Registered Nurses' Association of Ontario (RNAO) is the professional association for registered nurses in Ontario. RNAO members practice in all roles and sectors across the province. Our mandate is to advocate for healthy public policy and for the role of registered nurses in enhancing the health of Ontarians. We welcome this opportunity to present our views on *Creating Ontario's Toxics Reduction Strategy*, the Ministry of the Environment discussion paper

Background

In the 2007 provincial election, the Liberal Party promised to ban the cosmetic use of pesticides and to "create a tough new toxic reduction law that requires companies that emit toxic pollution to reduce their emissions over time." In June 2008, the Government passed Bill 64 on cosmetic use of pesticides and is in the process of writing the associated regulations. With respect to toxics, it has consulted with stakeholders and released the toxics reduction discussion paper for public consultation on August 27, 2008. As the document notes, Ontario has the dubious distinction of being one of the worst emitters of toxics in North America.

This is worrisome because chronic conditions such as asthma, cancer, developmental disabilities, and birth defects have become the primary causes of illness and death in children in industrialized countries, and there is growing expert recognition that chemicals in the environment are partly responsible for these trends.¹ Large numbers of dangerous chemicals showed up in the blood of Canadians tested for toxics.^{2 3 4 5} Of particular concern is the safety of children, who are much more vulnerable to toxics.^{6 7 8 9 10} For a sense of the magnitude of the health problem caused by the environment, consider that the Ontario Medical Association has concluded that 9,500 deaths per year in Ontario are attributable to a limited number of air pollutants alone.^{11 12}

RNs have a strong sense of urgency about toxics because any delays mean more people become sick and die every day. RNAO has been working with a broad range of health and environmental partners to promote sharp reductions in the use and release of carcinogens and other toxics in Ontario. Those partners include the Canadian Cancer Society, the Ontario College of Family Physicians, the Canadian Association of Physicians for the Environment, the Ontario Public Health Association, and the Canadian Environmental Law Association (CELA). There is remarkable consensus among these health and environment groups about the need for quick action and specific steps, which must be followed.

Response to the Discussion Document

RNAO applauds the government for moving quickly to introduce this important legislation. The consensus among health and environment groups is that the discussion document has a number of the key elements necessary for an effective toxic use reduction program, so it represents an important step in the right direction. However, these groups also identify several key elements which are missing. These points are well elaborated in CELA's, *Submissions to the Ontario Ministry of the Environment on Creating Ontario's Toxics Reduction Strategy Discussion Paper*¹³, and RNAO endorses the analysis and recommendations in those submissions¹⁵.

RNAO urges that this legislation be guided by the precautionary principle¹⁶ and include all of the essential, consensus elements:

- ambitious targets for reductions in toxic releases, which have proven achievable in other jurisdictions like Massachusetts
- broad coverage of use and emissions
 - this would include more chemicals than proposed in the discussion paper
 - this would include all significant sources of toxics, and not just large users in the manufacturing and mineral processing sectors

- substitution of safer alternatives to toxics
- mandatory pollution prevention plans by industry, to be certified by planners
- materials accounting for use and release of toxics
- regular reporting on progress in toxic reduction by facilities
- comprehensive community right to know about toxics in the environment, in the workplace and in consumer products (including labeling)
- allowing most health-protective laws and bylaws to prevail (unlike the recent pesticide legislation, Bill 64, that voided municipal pesticide bylaws)
- establishing an independent university-based research institute that will build Ontario's capacity for toxic use reduction, safe substitution and green chemistry
- establishing programs to deliver technical assistance on toxic use reduction for industry, for labour, and for communities.
- adequate funding for the above programs through fees on toxic use and release.
- strong compliance remedies for government and the public

The Ministry discussion document delivers some of these requirements, but not all:

- It proposes new requirements for toxics: materials accounting (for use, release and disposal); toxic reduction plans; reporting; and public disclosure. Compliance with reduction plans is voluntary; voluntary programs generally experience difficulties with compliance.
 - Aggressive targets must be added.
 - A focus on substitution of safer alternatives must include identification of priority toxics for substitution and company toxic reduction plans based on government alternative action plans.
- It proposes to cover only certain users and emitters. It would only include those using designated toxics: if the toxic use exceeds a designated threshold; and if the facility is in a designated sector (manufacturing or minerals processing); and if the facility exceeds an employment threshold (10 full-time employees) or use threshold (10,000 kilograms or federal threshold). This misses smaller emitters and other sectors; in cities like Toronto, the large majority of emissions would not be covered.
 - More chemicals must be covered, and the phase-in of coverage must be simplified and accelerated.
- It proposes a ban or restriction on toxics in consumer products, and requires public reporting on toxics in those products. This is welcome, but a requirement for inclusion in labeling must be added.
- Technical assistance is proposed, but this must be backed by the creation of bodies mandated to provide this assistance and funded through toxic use fees.
- It proposes to provide Ontarians with information on toxics in the environment and in consumer products. This is essential.
- It proposes economic and other incentives for toxic reduction. This must be supplemented by strong compliance remedies for government and the public.

In sum, the Ministry discussion document represents an important step in the right direction, but RNAO cannot support toxics reduction legislation that does not meet the significant concerns cited here, and which our many health and environmental partners share. RNAO will continue to work with Ministry officials to help ensure that Ontarians receive the high level of protection from toxics that they need and deserve.

References

- ¹ Canadian Association of Physicians for the Environment. (2006). *A New and Improved CEPA*. Toronto: Author, 3.
- ² In 2005, 2006 and 2007, Environmental Defence reported tests showing that Canadians, including children, had present in their bodies many chemicals that are known or suspected health hazards. These included: chemicals that cause reproductive disorders; hormone disruptors; neurotoxins; and those associated with respiratory illnesses. The tests found that the test subjects were heavily polluted: they had in their blood on average about half of all the many chemicals which were tested. See this and the following three endnotes. Environmental Defence. (November 2005). *Toxic Nation: A Report on Pollution in Canadians*. Toronto: Author.
- ³ Environmental Defence. (June 2006). *Polluted Children, Toxic Nation: A Report on Pollution in Canadian Families*. Toronto: Author.
- ⁴ Environmental Defence. (January 2007). *Toxic Nation: On Parliament Hill: A Report on Pollution in Four Canadian Politicians*. Toronto: Author.
- ⁵ 15 Pollution Watch. (2006). *Reforming the Canadian Environmental Protection Act: Submission to the Parliamentary Review of CEPA, 1999*. Toronto: Author.
- ⁶ Children are exposed to more toxics per body weight, absorb ingested substances differently, have developed fewer protections against toxics, face additional risks while undergoing development, face higher exposures due to activity and behaviours, and have much more time to develop disease from toxics. Environmental Defence. (June 2006) Op. cit, 7-9.
- ⁷ Cooper, K. et al. (2000). *Environmental Standard Setting and Children's Health*. Toronto: Canadian Environmental Law Association and Ontario College of Family Physicians, 30-36.
- ⁸ Government of Canada. (2006). *Children's Health and the Environment in North America: A First Report on Available Indicators and Measures – Country Report: Canada*. Ottawa: Author, 20. Retrieved August 8, 2008 from: http://www.cec.org/files/PDF/POLLUTANTS/CountryReport-Canada-CHE_en.pdf.
- ⁹ Wigle, D. T. (2003). *Child Health and the Environment*. Oxford: Oxford University Press, 75.
- ¹⁰ Canadian Partnership for Children's Health and the Environment (CPCHE). (August 2005). *Child Health and the Environment: A Primer*. Toronto: Author, 21.
- ¹¹ Ontario Medical Association. (June 2008) [Ontario's Doctors: Thousands of Premature Deaths due to Smog.](http://www.oma.org/Media/news/pr080606a.asp) retrieved October 9, 2008 from <http://www.oma.org/Media/news/pr080606a.asp>
- ¹² Particles (PM_{2.5} and PM₁₀), ozone (O₃), sulphur dioxide (SO₂), nitrogen dioxide (NO₂) and carbon monoxide (CO). Ontario Medical Association. (June 2005). *The Illness Costs of Air Pollution.*, 2
- ¹³ Available at: <http://www.cela.ca/publications/cardfile.shtml?x=4039>.
- ¹⁴ For further material on toxics and toxic use reduction, see the CELA toxics page at: <http://www.cela.ca/coreprograms/detail.shtml?x=4014>.
- ¹⁵ There are different formulations of the precautionary principle. For example, "When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action." - [Wingspread Statement](http://www.sehn.org/wing.html) on the Precautionary Principle, Jan. 1998, retrieved April 20 October 10, 2008 from <http://www.sehn.org/wing.html>.